

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PEOPLE HELPING PEOPLE

ADDRESS (number and street)

249 E Ocean Blvd Ste 685

Check if different
than previously
reported. (ACC)

Long Beach

CA

90802

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00248948

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

GOULD, DAVID L., , ,

Type or Print Name of Treasurer

Signature of Treasurer

GOULD, DAVID L., , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

PEOPLE HELPING PEOPLE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2017		2462.78
(b) Cash on Hand at Beginning of Reporting Period.....	18563.20	
(c) Total Receipts (from Line 19)	35000.00	53250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	53563.20	55712.78
7. Total Disbursements (from Line 31).....	20880.59	23030.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	32682.61	32682.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

PEOPLE HELPING PEOPLE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	2		3	1		2	0	1	7		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	11750.00
(ii) Unitemized	0.00	1500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	13250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	35000.00	40000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35000.00	53250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35000.00	53250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35000.00	53250.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15880.59	18030.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15880.59	18030.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20880.59	23030.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20880.59	23030.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	35000.00	53250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35000.00	53250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15880.59	18030.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15880.59	18030.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Aflac Incorporated Political Action Committee

Mailing Address 1932 Wynnton Rd

City
Columbus

State
GA

Zip Code
31999

FEC ID number of contributing
federal political committee.

C

C00034157

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐

Primary

☐

General

☒

Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2017

Transaction ID : 11C-494

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Build PAC National Association of Home Builders

Mailing Address 1201 15th Street NW

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

C00000901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐

Primary

☐

General

☒

Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 23 / 2017

Transaction ID : 11C-488

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Council of Insurance Agents & Brokers PAC

Mailing Address 701 Pennsylvania Ave NW ste 750

City
Washington

State
DC

Zip Code
20004

FEC ID number of contributing
federal political committee.

C

C00039578

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐

Primary

☐

General

☒

Other (specify)

Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2017

Transaction ID : 11C-493

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KPMG PAC

Mailing Address PO Box 18254

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

C00280222

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary
☒ Other (specify)

☐ General
 Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2017

Transaction ID : 11C-492

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KPMG PAC

Mailing Address PO Box 18254

City
Washington

State
DC

Zip Code
20036

FEC ID number of contributing
federal political committee.

C

C00280222

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary
☒ Other (specify)

☐ General
 Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2017

Transaction ID : 11C-491

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. National Apartment Association NAA PAC

Mailing Address 4300 Wilson Blvd. Ste. 400

City
Arlington

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C

C00113241

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary
☒ Other (specify)

☐ General
 Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2017

Transaction ID : 11C-490

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

10000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PricewaterhouseCoopers PAC

Mailing Address 600 13th St NW Ste 1000

City
Washington

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

C00107235

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2017

Transaction ID : 11C-489

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Property Casualty Insurers Association of America Political Action Committee

Mailing Address 8700 West Bryn Mawr Ave. Ste. 1200

City
Chicago

State
IL

Zip Code
60631

FEC ID number of contributing
federal political committee.

C

C00066472

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 21 / 2017

Transaction ID : 11C-487

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Realtors Political Action Committee

Mailing Address 430 N. Michigan Ave.

City
Chicago

State
IL

Zip Code
60611

FEC ID number of contributing
federal political committee.

C

C00030718

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 21 / 2017

Transaction ID : 11C-496

Amount of Each Receipt this Period

2500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

12500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 16

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wal-PAC Wal-Mart Stores Inc. Political Action Committee For Responsible Government

Mailing Address 702 SW 8th St

City

Bentonville

State

AR

Zip Code

72716

FEC ID number of contributing
federal political committee.

C

C00093054

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary

☐ General

☒ Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 13 / 2017

Transaction ID : 11C-495

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wal-PAC Wal-Mart Stores Inc. Political Action Committee For Responsible Government

Mailing Address 702 SW 8th St

City

Bentonville

State

AR

Zip Code

72716

FEC ID number of contributing
federal political committee.

C

C00093054

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2018

☐ Primary

☐ General

☒ Other (specify) ▼

Calendar Year

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 16 / 2017

Transaction ID : 11C-497

Amount of Each Receipt this Period

- 2000.00

☐ Memo Item

Returned Item - NSF

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

35000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
OFFICE EXPENSES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

FEC Identification Number

C

Transaction ID : 21B-800

Amount of Each Disbursement this Period

545.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
PAC Management/Political Reporting Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		03		2017

FEC Identification Number

C

Transaction ID : 21B-801

Amount of Each Disbursement this Period

652.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
PAC Management/Political Reporting Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

FEC Identification Number

C

Transaction ID : 21B-808

Amount of Each Disbursement this Period

880.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2078.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
Office Expenses

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-809

Amount of Each Disbursement this Period

438.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
PAC Management/Political Reporting Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-815

Amount of Each Disbursement this Period

861.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOULD & ORELLANA, LLC

Mailing Address 249 E. Ocean Blvd., Suite 685

City
Long BeachState
CAZip Code
90802Purpose of Disbursement
Office Expenses

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	5			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-816

Amount of Each Disbursement this Period

119.58

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1419.42

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address Los Angeles International Airport

City
Los AngelesState
CAZip Code
90048Purpose of Disbursement
Airfare

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-803-P

Amount of Each Disbursement this Period

630.10

credit card payee

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address Los Angeles International Airport

City
Los AngelesState
CAZip Code
90048Purpose of Disbursement
Airfare

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-802-P

Amount of Each Disbursement this Period

538.50

credit card payee

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
Credit Card Payment

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Calendar Year

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2			2	0	1	7		

FEC Identification Number

C

Transaction ID : 21B-770-W

Amount of Each Disbursement this Period

2362.26

Expenditure purpose details appear
in Credit Card Payees reaching
disclosure threshold.☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2362.26

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

PEOPLE HELPING PEOPLE

Three digital displays showing the date 07/25/2017 in MM/DD/YYYY format. The first display shows '07' with 'M' labels above. The second shows '25' with 'D' labels above. The third shows '2017' with 'Y' labels above.

626.60

X Memo Item

Three digital displays showing the date 07/26/2017 in MM/DD/YYYY format. The first display shows '07' with 'M' labels above the digits. The second display shows '26' with 'D' labels above the digits. The third display shows '2017' with 'Y' labels above each digit. The displays are separated by slashes.

375.00

 Meme Item

Category/
Type

8510.63

Memo Item

8510.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. Congressional Black Caucus

Mailing Address 1720 Massachusetts Ave.

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Donation

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	7		

FEC Identification Number

C**Transaction ID : 21B-813-P**

Amount of Each Disbursement this Period

7500.00

credit card payee

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Hertz Rent A Car

Mailing Address 50 Massachusetts Ave. NE

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Transportation Expense

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	4			2	0	1	7		

FEC Identification Number

C**Transaction ID : 21B-814-P**

Amount of Each Disbursement this Period

743.71

credit card payee

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ACLU Foundation of Southern California

Mailing Address 1313 W 8th Street

City
Los AngelesState
CAZip Code
90017Purpose of Disbursement
Donation

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

State: District:

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	9			2	0	1	7		

FEC Identification Number

C**Transaction ID : 21B-817-P**

Amount of Each Disbursement this Period

1200.00

credit card payee

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. California Bank & Trust

Mailing Address 550 S. Hope Street Ste. 100

City
Los AngelesState
CAZip Code
90071Purpose of Disbursement
Credit Card Payment

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

Calendar Year

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2

FEC Identification Number

C

Transaction ID : 21B-777-W

Amount of Each Disbursement this Period

1510.00

☐ Memo ItemExpenditure purpose details appear
in Credit Card Payees reaching
disclosure threshold.

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1510.00

TOTAL This Period (last page this line number only).....▶

15880.59

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 16

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE

Full Name (Last, First, Middle Initial)

A. Friends of Marilyn Mosby

Mailing Address P.O. Box 23255

City
BaltimoreState
MDZip Code
21203Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Mosby, Marilyn, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☐ Other (specify) ▼

State: MD

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	7		

FEC Identification Number

C

Transaction ID : 23-810

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

5000.00